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1	FAIRBANKS, ALASKA - FRIDAY, JANUARY 9, 2009
2	(Call to Order of the Court at 11:01 a.m.)
3	THE CLERK: All rise. His Honor the Court, the
4	United States District Court for the District of Alaska is now
5	in session, the Honorable Ralph R. Beistline presiding. Please
6	be seated.
7	THE COURT: Good morning.
8	MR. LOGAN: Good morning, Judge Beistline.
9	MR. WALLACE: Good morning.
10	THE COURT: So, nothing else to do in Fairbanks
11	today, huh, but come here?
12	MR. LOGAN: Staying here just for you. I'm leaving
13	at eight o'clock tonight for the warm weather.
14	THE COURT: Okay. What is the lighting? What's
15	what's this lighting, just to add to the
16	MR. LOGAN: The ambiance.
17	THE COURT: Okay. Well, I appreciate that. The
18	question we're it's <u>Probert</u> , et. al. v. Family <u>Centered</u>
19	<u>Services</u> , 4-7-30. Question is do the overtime provisions of
20	the 1938 Fair Labor Standards Act apply to employers of Family
21	Centered Services of Alaska? Plaintiffs say yes, defendant
22	says no. What's the answer?
23	MR. LOGAN: Well, obviously it's yes.
24	THE COURT: Okay. Why do you say so?
25	PLAINTIFFS' ARGUMENT
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1	MR. LOGAN: Okay. The reason I gave you Miss, if
2	we can go ahead and focus a little bit better. 29 U.S.C.
3	203(r) and (s) are the sections that we're talking about. Your
4	Honor, I've given
5	THE CLERK: I'm sorry to interrupt. Mr. Logan, if
6	you I'll need you to put the lapel mike on if you're going
7	to stand away from the mike.
8	MR. LOGAN: Where's the lapel mike?
9	THE CLERK: It's right at the front of the podium.
10	MR. LOGAN: Oh oh, there it is.
11	THE COURT: Okay.
12	(Pause)
13	MR. LOGAN: There we go. Sorry.
14	THE COURT: Okay.
15	THE CLERK: Much better. Thank you.
16	MR. LOGAN: I gave hard copies of this to the Court
17	and also to your Clerk so if that's helpful. Oh, and then you
18	even have the statute.
19	THE COURT: I have the book.
20	MR. LOGAN: Ah, hey. How can I get past that?
21	(Indiscernible) talked about enterprise liability, and what
22	they're saying is that under certain circumstances, a business
23	such as this is obligated to pay overtime.
24	Now, the last time we came before you with respect to
25	a motion for summary judgment, it had to do with mental illness

and a somewhat tight reading of that term. You decided that there were questions in fact had to be decided before we'd be able to go ahead and decide the issue. However, mental illness is a subset of a larger group of behaviors known as sick.

THE COURT: 'Kay.

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MR. LOGAN: Now, the Department of Labor has promulgated a handbook called the Field Operations Handbook. Department of Labor does enforcement of the Fair Labor Standards Act, and this book -- or this -- I think it is a book format, but the -- it's a fair -- as the handbook says that sick here means infirm or the like. The trigger is going to be infirm. The exact language which I had marked (indiscernible background noise) a second ago is: "A physical or mental infirmity or sickness of any kind." As good as we can find, nobody has addressed this issue in this -- in any jurisdiction. But again, I repeat, "a physical or mental infirmity or sickness of any kind." I shorthand that by calling it infirmity.

This interpretation by the Department of Labor is made for the sole purpose of enforcing the rules by their enforcement personnel. As I said, mentally ill is a subset, if we're going to accept the limited version of what mentally ill says, of infirmity; however, it's a part of a larger set and an overlapping one. Somebody can be mentally ill and still have a mental infirmity without being mentally ill and falling within

the definition that's being promulgated by Youth Services.

Everything that we've gotten from them, not from us, agrees with that interpretation. There's nothing in Section 203 to disagree; sick, infirm, there's no disagreement there. The Department of Labor's Field Operation Handbook, as I indicated, says infirmity means mental infirmity or sickness of any kind. The common usage, which we talked about in the briefing, talks once again about mental or physical infirmity. That was the Webster's citation.

Now, let's take a look at client profile of who gets into the Fairbank -- or the therapeutic family home, and I boiled it down so we can just take a look for a second here. All children admitted to the program will require stabilization for mental illness and/or behavioral disorders -- this was part of the 2004 hand -- or 2004 description, and I know of no reason and they've presented no reason why it's no longer in effect or that they're doing anything different -- or they're suffering from a mental illness, or they need imminent placement in a mental health facility, or they'll benefit from stabilization and reduction or resolution of their mental illness by being in the therapeutic family home. In other words, they're infirm.

Who doesn't get in to the therapeutic family home? Who doesn't count? Generally, they will not admit somebody that simply requires temporary foster care, but who does not

require stabilization or treatment of a mental illness.

They're sick. They're at least sick if we use a broad interpretation which is what we're supposed to use rather than a limited interpretation which is what they've been suggesting we use.

Now, Mr. Regitano, who's had quite a bit to say to us about why these children are not mentally ill, in fact he's said many things about that. Let me see if I can get this right. He says that the children are experiencing emotional or behavioral problems and are at risk of placement in institutional facilities. Mr. Regitano says Medicaid pays for services. Medicaid pays for medical treatment. It doesn't pay for foster care. Medicaid — or the primary purpose of the family homes is an alternative for children at risk of being institutionalized. Mr. Regitano said these children have emotional and behavioral problems severe enough to make institutionalization a risk.

Mr. Regitano said the children admitted to the family home received clinical in-takes, functional assessments, and evaluation by a mental health clinician. We could go into why we use mental health clinicians instead of psychiatrists, psychologists or physicians, but it might have a lot to do with the fact that in 1966, we didn't have very many master degreed mental health clinicians and had -- if Congress thought about it, they probably would have included it.

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However, if we go ahead, we accept this tight -- this definition, we're still working with a mental health clinician who's evaluating, assessing these children and creating a diagnosis out of the -- under the rule that they have created. They give them group therapy, they give them individual therapy. The therapy's conducted by a clinician, not by a psychiatrist, a psychologist or physician, but Mr. Regitano says that a clinician can do this. That's certainly not something you do for somebody who's not at least a little bit sick or infirm.

He admits that there's a limited amount of therapy. Mr. Regitano also says that master's level clinicians are what he used at the family home -- or the family homes. The Youth Services also has a contracted psychiatrist and at least some of the kids receive medication. The children are evaluated by a mental health clinician and provided with a diagnosis.

If I'm repeating myself a bit, it's because so did Mr. Regitano. A moment, Your Honor.

(Pause)

Thank you.

Common diagnoses: Attention deficit disorder, depressive disorder, reaction -- reactive detachment disorder, post-traumatic stress disorder, anxiety disorder, and a list that if I recall correctly was about two inches long. Mr. Regitano said that the children have emotional and/or

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behavioral problems. He acknowledged that the children admitted to the therapeutic family homes need a stable and supportive residence, and have behavioral problems which if not addressed, could ultimately develop into serious mental illness and require institutionalization.

Mr. Regitano said that children with severe mental illness would not be admitted to the therapeutic family homes. We will talk about what severe emotional disturbance means later, but I'm not quite sure that I see a big difference between severe mental illness and severe mental -- and severe emotional disturbance.

Mr. Regitano said that they all have an axis one diagnosis, and I believe that an axis one diagnosis is actually required if they're going to go ahead and get medicated.

We mentioned in the briefs that new hires are asked how they're going to hand -- what problems they think that they might have dealing with severely emotionally disturbed children. Not foster kids that need a place to sleep, not foster kids who don't have a good home to go to, but severely emotionally disturbed children. If they don't qualify as mentally ill, they're certainly ill or infirm.

Their policy and procedures manual -- let's see if I get it right. Their client profile policies in their policies and procedures manual says that children admitted to the program will require stabilization for actions that are as a

result of mental illness and/or behavioral disorders. Their client profile says:

"The children will have been determined through clinical assessment to be suffering from a mental illness not of an organic origin."

I might mention that I think the language has changed a little bit ever since -- since about four years ago when they discovered (indiscernible) is what I think really happened.

But this is what they originally said. There's been no evidence to show that there's any difference in what really happens in the world.

The policies and procedures manual says that these kids are in imminent need of placement in a mental health treatment facility, and it says that they've been determined by the therapeutic family home admission review that placement would be beneficial to stabilization or reduction or resolution of their mental illness. As I indicated, they will not be admitted if they do not require stabilization or treatment due to mental illness. Those kids who are not in need of stabilization or treatment because they have some kind of mental illness are not admitted to the therapeutic family homes.

Now, if we use the Youth Services definition, it says you need a psychiatrist, a psychologist, or a physician. Then we step outside of this box called infirmity and there's a

question of fact. But you don't need to step out there to realize that they're sick, they're infirm, they're ill, and that part of the box allows you -- in fact, requires that you find that they have -- that they qualify under 203 and they need to be paying these people overtime. There is no really -- there's no other reasonable interpretation.

Now, there's a couple of other issues that I need to address, but I need to say it one last time because I'm not capable of saying things only once --

THE COURT: See, the beauty of this is right now, believe it or not, my law clerk is listening to every word you're speaking from her office in Anchorage, and I'm going to be able to listen to this many times over --

MR. LOGAN: I'm absolutely certain --

THE COURT: -- through the miracles of modern technology.

MR. LOGAN: Right. And through the miracles of the fact that I never can keep my mouth shut.

THE COURT: Well, okay.

MR. LOGAN: Bottom line, these kids are ill, they are infirm as defined by a Field Operation Handbook which was promulgated by the Department of Labor for enforcement purposes. There's no other reasonable answer -- at least if there is, I certainly don't understand it.

Now, I have to touch on a few things -- as soon as I

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can read my writing.

In their opposition at page four, they quoted the Field Operation Handbook, 12G02, and they gave you a little title, but they ignored the language about infirmity of any kind. They talked about Medicaid, giving us some definitions. One of the interesting things in the definition is that you determine what this program is by its overall character, not by some very technical way of going about it, but by its overall character. That's what Medicaid says. It's their cite. It also seems to me like common sense.

Kitchings. Boy, we hear about Kitchings and we hear about Kitchings, we hear about Kitchings. Kitchings is a district court case in Florida. However, it's got some interest, and one of the things is that Kitchings said that they don't treat severely mentally ill children. What in the world is severely emotionally disturbed other than severely mentally ill? Maybe not by definition of psychiatrists or psychologists or a physician, but they're severely emotionally whatever you want to put at the end of it, illness, disturbance, infirmity. It's severe and it's emotional. So, Kitchings is halfway there for us.

All of the evidence equals infirmity, and all of that infirmity is being treated by a very useful and very important program in Fairbanks. I don't want to see them close their doors, but there has to be a way to compensate these people at

the same time as following the law. We think that that means there would be less turnover. And, you know, for these children, every single time there's a new parent, there's a new abandonment, there's a new change in who their role model is. We think that if they can work out a way that the Fair Labor Standards Act was meant to work out, they're going to keep their help, and that's better for the kids.

If they were as creative in finding a way to pay these people within the Fair Labor Standards Act as they are in trying to get out of it, I don't think we'd be here and I think they'd have a better program.

In any case, they had to send us the eleventh hour -THE COURT: Well, I want to give Mr. Wallace a chance
to speak, too, and -- you know, and you've used already going
on twenty-five minutes, so finish your -- your thought.

MR. LOGAN: I think maybe I better just keep my thought.

THE COURT: Okay. I just want to make sure we get equal time. You know, I remember years ago I was trying to convince Judge Van Hoomissen of something, and I finally had to graph it out for him and he understood it. So, I'm trying to graph out in my mind this whole thing. I understand that 1938 Congress -- that's over seventy years ago, Congress enacted the Fair Labor Standards Act, which required certain employees involved in interstate commerce to pay -- certain employers in

interstate commerce to pay its employees overtime. And what we're doing here today is trying to determine out -- determine whether Family Centered Services of Alaska falls within the category of those employees. And so I'm trying to chase down exactly how we get here.

You've moved way down to -- the dispute between you two gentlemen is way down the list, and that is whether or not -- and that's what you've been talking about today.

MR. LOGAN: I can take you there.

THE COURT: Well, I think I've pretty well gotten there, but if you can take me there in a minute, that' would be helpful.

MR. LOGAN: I'll take you in ten. In 1966, Congress changed that law some, and what they said was if you're engaged in certain be -- in certain activities, then you will have what is known as enterprise -- enterprise liability, enterprise -- instead of being interstate commerce, we're going to define this as this enterprise does meet interstate commerce.

THE COURT: Okay. All right.

MR. LOGAN: Okay? And in order to get there, you have to file within these categories of people.

THE COURT: And that's what we've got here.

MR. LOGAN: And that's what we get for now. It's simple enough. It didn't exist between nine -- in 1965, we could not (indiscernible). In 1966, we were included unless it

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THE COURT: 'Kay.

MS. RINGSTAD: Okay. Family Centered Services operate their family homes as residential child care facilities; that's how they're licensed. They provide a home for children that have emotional and behavior problems.

Another key element is that they have no safe and stable home or foster home. These children have no home that can help them deal with their problems; therefore, they have the family homes with the therapeutic (indiscernible) parents that are supposed to be modeling (indiscernible) behavior and helping them shape the behavior and then control their emotions and their life skills.

Another key factor that they not be suffering from a serious mental illness because they're not equipped to handle children with severe mental illnesses. And if the children are seriously ill, they will not be admitted to the home, they're moved and placed in an institution.

The fourth thing that they don't require institutional -- institutionalization or restricted environment. These kids -- the homes are set up like private homes, the kids attend public school, they ride the school buses, they attend after-school activities and community events. Their (indiscernible) involves new life skills, attending school, educational support, community activities. The therapy they -- they receive is very limited. They meet

twice a week for two hours each time, so two hours a week, in a group with the other members of the home so the kids can discuss their living arrangements, and they receive one hour of therapy -- individual therapy each week. That's all the therapy they receive.

They are not admitted to a home based on any kind of a thorough -- or evaluation by psychiatrists or psychologists or a physician. They are evaluated by clinicians after they're admitted, and the clinicians are basically licensed -- they licensed social workers. They see a psychiatrist only if their medication is (indiscernible) for any kind of treatments.

Now, under the Fair Labor Standards Act, non-profits are covered only if they are engaged in the care of the sick, the aged, the mentally ill, or defective. There is no indication that Congress listed those with the intent of including mental illness as a subset of the sick. Those are listed separately. And I believe the common sense definition of sickness would be physical sickness, especially where they separately listed mental illness.

If they intended for children with emotional disturbances that were not serious enough to constitute a mental illness to be included, they would have separately listed emotional disturbed children as within coverage.

Now, the Department of Labor's Field Operation

Handbook -- I cited some cases yesterday in the supplemental

citations -- is not entitled to the kind of deference that is given to agency regulations. It's simply a handbook to help their employees that enforce the laws, and this Court may decide it's persuasive or not persuasive.

The provisions in the handbook addressing children provide that there is no coverage for a non-profit caring for neglected independent children unless it is a hospital, covered institution, or school.

The provision addressing emotional -- persons with emotional disturbances requires that more than fifty percent of the residents be admitted or evaluated by a physician, psychiatrist or psychologist. In this case, the kids were not evaluated or admitted by a physician, psychiatrist, and psychologist, indicating that the conditions were not serious enough -- the conditions were not serious enough to require admission or evaluation by a physician, psychiatrist, or psychologist. The conditions did not constitute mental illness, sickness, or defective under coverage in the Field Operations Handbook.

I think that test is basically to sort out emotional disturbances instead of serious -- having emotional disturbances that are not serious. In this case, they were not serious enough to require admission or evaluation by a psychiatrist, psychologist, or physician.

Now the section that they rely on in the handbook is

12G02, where there is some (indiscernible) language, but that is not a section that's defining sickness or mental illness. It doesn't define sickness as including any infirmity, and it doesn't negate the requirement that the residents must be the sick, the aged, or the mentally ill or defective.

The focus must be on whether residents are the sick, the aged, or (indiscernible) defective. And in the case -- (indiscernible) cases was Kitchings and Bowen (ph):

"Coverage did not extend to children who were residing in family homes with house parents, went to the public schools, and who received limited therapy."

In the <u>Bowen</u> case, the court distinguished between there are homes -- where the children resided in homes, attended school, and did receive limited therapy from their homes that were said to (indiscernible) serious mental illnesses. It was only the later homes that dealt with children with serious mental illnesses that were covered by the act.

And the court distinctly said that the (indiscernible) -- described as created specifically addressing children with severe mental health and not behavioral health commissions. The program employed psychiatrists, psychologists, social workers, and nurses to attend to the residents' mental health needs, none of which is in -- (indiscernible) in the family homes. And by the home's own

admission, fifty to seventy-five percent of its residents suffered from a severe mental illness.

The court considered the nature of the population, the type of the care provided by the home, and that -- the factors for admission. And the state found this consistent with the department (indiscernible) approach, looking at the nature and the amount of services provided by the non-profits. And looking at the services provided here, I don't believe any of those services would be the type of services that would be treating the mentally ill.

And the plaintiffs have the burden of proving that Family Centered Services fell within 203(r) and (s). And in the absence of any evidence that the children were mentally ill or physically sick, they should not be granted summary judgment. In fact, summary judgment should be granted in favor of Family Centered Services.

THE COURT: Okay. So you want -- you want summary judgment in your favor.

MS. RINGSTAD: I think -- I think that -- yes.

THE COURT: Okay. I'm not -- I don't mean okay, I mean okay, it's Mr. Logan's turn.

MS. RINGSTAD: Is there anything -- any questions?

THE COURT: No, I -- I'm not going to make a decision today if that's what you think. I'm still working on this.

| I've got books -- you know, I've got law clerks searching --

Case 4:07-cv-00030-RRB Document 140-2 Filed 12/04/2009 Page 22 of 33		
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1	this is not something we deal with every day.	
2	(Pause)	
3	Why don't they just make it clear so that I don't have to spend	
4	all this time wading through these things and trying to figure	
5	out what someone else meant forty years ago?	
6	MR. LOGAN: Because they did it twenty years ago	
7	THE COURT: Okay.	
8	MR. LOGAN: and because it's Congress.	
9	THE COURT: Okay.	
10	PLAINTIFFS' REBUTTAL ARGUMENT	
11	MR. LOGAN: I'm going from memory. I believe that I	
12	am correct, but this will be something that that somebody's	
13	going to have to look up. My memory, compared combined with	
14	somebody who helped me work on it, says that the reason that	
15	they added they added these this scope of enterprise	
16	THE COURT: Mm-hmm (affirmative).	
17	MR. LOGAN: in 1966 was to add to non to the	
18	hospital model, non-profits. Prior to that time, the non-	
19	profits were not there. That's your recollection. Okay.	
20	That's two recollections. It doesn't mean it's right, but it's	
21	better than one recollection. Okay.	
22	Family Centered Youth Services goes back and re-	
23	argues mentally ill as being this tight idea that you have to	
24	have psychiatrists, psychologists, and physicians. We briefed	
25	it to death and I'm not going to do it again. We just think	

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I mean, no, they could be right. they're wrong. right, they're still not going to get out of this because this is an overlapping part of the set, and if I had been able to figure out how to do VIN (ph) diagrams at three o'clock this morning, you'd have one, okay? THE COURT: That's all right. But I couldn't figure out how to get the MR. LOGAN: computer to do it. Let's talk about what the Field Operation Handbook says just for a second. THE COURT: Okay. I'm going to give you seven minutes and Ms. Ringstad seven minutes --MR. LOGAN: Okay. Thank you. THE COURT: -- so everybody's -- fair time. Which says "suffering from MR. LOGAN: Gotcha. physical or mental infirmity or sickness of any kind." very clear, the inter -- of any kind sort of gets me there. THE COURT: They say that's not -- not authoritative though. MR. LOGAN: Well, she says it's not authority, however, let's see why she says that. She says it's not

MR. LOGAN: Well, she says it's not authority, however, let's see why she says that. She says it's not authority because she's saying, you know, handbooks aren't, and she cites to a case called Brennan -- Brennan -- Brennan -- Live never really even heard of them, but apparently they have their own handbook. And it said -- you look at it and you decide

whether or not it fits within the whole picture and give it the weight its worth.

However, <u>Brennan</u> -- which by the way was in another jurisdiction -- in 1974 also said this. It says:

"Courts would also lack prudence to dictate to the Secretary exactly how to perform his duties which are expressly within the expertise of the Secretary of this Department."

So, whether it's binding on (indiscernible) or I think it's a line of cases that starts with a case called <u>Skidmore</u>. You're supposed to take a real close look at it and would lack prudence just to go ahead and ignore it. They meant something.

And this is -- the other -- let me point out one other thing. They issued -- they mentioned another bunch of cases. Those cases are talking about the informal letter of opinion that people ask for so they can keep out of trouble; how they spin it, how they don't spin it, doesn't matter. But those cases, almost all of them talk about informal opinions -- opinion letters, and I believe that opinion letters really aren't entitled to deference.

I think the rest are and I think that in the case of an enforcement -- an enforcement handbook written by the people that are doing the enforcement were there. Now let's see what we've got to do with it. I tried -- quoted Eyre, and that's hard to get Eyre to -- there we go.

Eyre says two things that are important to you. It
says that:

"The Fair Labor Standards Act grants the Secretary broad authority to define and delimit the scope of the exemption for executive, administrative, and professional employees."

It's the same -- it's the same deal. We're talking about the fair -- the Secretary administering their own law. That's at 519 U.S. at 452, and I believe the page number -- well, it's in there. Sorry.

Now, here's what's important because Congress has not directly spoken to the precise question at issue. We must sustain the Secretary's approach so long as it is based on a permissible construction of the statute, and then they cite to Chevron. This was a Ninth Circuit case in 1997 -- the briefs are in there, but it's 519 U.S. at 452, and I'll leave it to your law clerks to do the rest on them.

What they're saying here is that these kids aren't sick enough to be called sick, they're not infirm, and that the Field Operation Handbook should just be ignored. That's what they're telling you to do, ignore it. Well, you shouldn't ignore it. You should at least give it what it's due at the very least, and since nobody else has said anything about it and since all of their information and their own testimony says there's something wrong with these kids, they can be helped by

these homes. These children are sick and they should be paying
their help at the therapeutic family homes overtime as required
by the statute. Is there anything else I can answer?
THE COURT: No. I'm just I'm thinking about on
the one hand, you've got a good policy (indiscernible) pay
employees fairly. On the other hand, you've got a good policy
that you want to encourage these very good institutions to keep
going. You don't want to you don't want to run them
financially run them out of business, but you want to pay the
employees fairly, so
MR. LOGAN: If they're going to tell you that they're
going to go out of business
THE COURT: I don't know. I'm just I'm just think
no one's telling me anything. I'm just kind of thinking
about this whole thing.
MR. LOGAN: Right. I know you're thinking
that, but it's up to them to give you some evidence that says
they're not going to be able to do it, and they haven't done
that.

THE COURT: No, I just -- okay.

MR. LOGAN: They haven't given you any evidence or made the allegation that we can't economically do this. All they're saying is it may be -- we'll have to give them more money.

THE COURT: How come this -- this has not been

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diagnoses and that we would see you in therapy. These are kids without homes, so I would think in almost all cases, there would be -- you would see some sort of diagnosis and some therapy.

And we haven't asked the Court to ignore the handbook that is not binding. I listed some cases, but there are a lot of cases say it's not binding authority. This Court is free to determine how persuasive the provisions are.

And the particular provision to beam the light on to bring in the infirmity language -- as I said, is it defining the term sick or mentally ill as any infirmity? It's -- they did a test determining whether the institution was primarily engaged in the sick -- the sick. And if you notice the clause that talks about physical inter -- physical and mental infirmity or sickness of any kind, is the clause such that -- with if. So in this case, unless the kids were either sick or mentally ill or defective, we wouldn't be in this at all.

The aged -- it might mean something if you're talking about the aged, that they would be in the home and might not be suffering from any kind of sickness, but otherwise necessarily they would be. So, I'm not sure this provision, especially the way it's being interpreted, makes any sense to me at all.

THE COURT: Well, I -- the word aged I presume means old --

MS. RINGSTAD: Yeah.

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1	THE COURT: There's not I suppose there's not
2	legislative history on this exact point, is there? No one's
3	given me any specific
4	MS. RINGSTAD: On whether or not
5	THE COURT: How you define these words. Sometimes a
6	congressman stands up or senator at a hearing and says, well,
7	make sure we understand, but that
8	MS. RINGSTAD: You know, there was in 1966, and at
9	that time, institutions were probably referred to as
10	institutions, not as homes, and diagnoses I think are much more
11	common that are much broader (indiscernible) all these
12	emotional disturbances that may be attention deficiencies, I
13	don't know how many of those even existed in 1966. So, I don't
14	know if they felt the need to really define the mental illness.
15	If you look at the state statute that talks about
16	mental illness, it's:
17	"A mental or emotional impairment that has a
18	substantial adverse effect on an individual's ability
19	to exercise conscious control and the individual's
20	actions or ability to perceive reality or delusion or
21	to understand."
22	And that is how the state defines mental illness.
23	These kids don't even qualify none of these kids
24	would qualify under that definition of mental illness. These
25	kids most of the kids don't even qualify for services

(701) 255-1054

Exh. 1 Page 32 of 33

1	CERTIFICATE
2 3	I certify that the foregoing is a correct transcript from the electronic sound recording of the proceedings in the above-entitled matter.
4	
	/s/ D. Kathleen Stegmiller 08/29/09 D. Kathleen Stegmiller, Transcriber Date
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